



Communications and Publications Division (CPD) of the IFCC

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International Federation of Clinical Chemistry and Laboratory Medicine







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EDITORIAL

Message from the eNews Editor

by Katherina Psarra eNews Editor

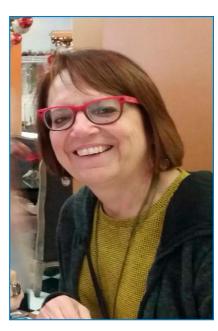
Dear colleagues,

It is the 1st of May today, as I write this for eNews readers, and I hope you all enjoy spring at its best, hope at its best.

I am sure you will find a lot of very interesting material in this issue and you will be excited about the activities already taking place or planned for the near future in IFCC among them the webinar about risk management in clinical laboratories on May 10th.

The message of our president, Prof. Khosrow Adeli, announces very important matters, like changes in the planning of conferences and like the new initiative of the IFCC Task Force on Global Lab Quality (TF-GLQ) planning a pilot program for external quality assurance (EQA) in developing countries. All the committees seem to be very active. Take some time and go through the articles as many initiatives may concern especially you.

Take some time and go through the CVs of new and past Chairs. Read Prof. Claude Dreux's obituary. These people will inspire you; they will make you wish to become better professionals.



Katherina Psarra

Dr. Bernard Gouget's article in this issue is about the vaccine passport. Is it ethical, is it democratic? Teamwork awarded by Univants is inspiring too. A lot of the articles in this May issue as in all the eNews issues underline teamwork.

Go through the issue, dear colleagues. I am sure that you will find a lot of interesting information. Spring and good weather are here to stay, and vaccines cover more and more of the population. Our next issue will be even more hopeful!

Katherina Psarra



8TH INTERNATIONAL SYMPOSIUM « ALAIN FEUILLU »

CRITICAL CARE TESTING AND BLOOD GASES

BIARRITZ - JUNE 10-11 TH, 2021

THE VOICE OF IFCC

IFCC President's message - May 2021

by Khosrow Adeli IFCC President



Prof. Khosrow Adeli PhD, FCACB, DABCC, FAACC

My sincere greetings to you all during these challenging times we are experiencing around the world. Despite entering the third wave of the pandemic, we remain positive about the eventual return to normalcy, thanks to the rapid global vaccination efforts.

In waiting for a return to normalcy, the IFCC Executive Board has taken the opportunity to review and revise its conference schedule. Going forward, the IFCC will have one main international conference each year, alternating between the IFCC EuroMedLab in Europe and the IFCC WorldLab in another region. This new schedule offers consistency, prevents overlap, and ultimately will make it easier for all of our IFCC members and regions to regularly attend and participate in these important scientific events. In line with this new conference schedule, the Executive Board has also decided to include all regional federations as conference partners. Now, we are working towards creating new guideline documents for all future conferences to aid in the planning, organization, and execution of these events, thus enhancing the conference experience for all attendees.

The new IFCC Task Forces also continue to make progress on a number of fronts. The IFCC Task Force on Global Lab Quality (TF-GLQ) has been planning a pilot program for external quality assurance (EQA) in developing countries. Recently, a survey and a call for applications to participate was sent out and a large number of national societies responded. After extensive discussion, the TF-GLQ has selected ten member countries for participation in the initial pilot program for both iQC and EQA (selected countries include: *Malawi, Zambia, Bosnia, Georgia, Serbia, Sri Lanka, Indonesia, Bolivia, Columbia, Peru*). Each country will select five laboratories within the region, resulting in a total of 50 participating laboratories. To start, the IFCC will support these laboratories in assessing their preparedness for the iQC and EQA program and addressing existing gaps by securing material and software and developing detailed guidelines for the program. When international travel is permitted, scientific support teams will be dispatched to initiate the program, and once initiated, a plan for maintenance and monitoring will be developed. Eventually, the global quality program will be expanded to include other geographical regions and additional laboratory tests. If interested, members can learn more about the TF-GLQ at https://www.ifcc.org/executive-board-and-council/eb-task-forces/task-force-on-global-lab-quality/.

Additionally, the IFCC Task Force on COVID-19 has recently developed a new *IFCC interim guidelines on rapid point-of-care antigen testing for SARS-CoV-2 detection in asymptomatic and symptomatic individuals* (the guideline document is in press in CCLM, 2021). This document summarizes available data on the performance of currently available SARS-CoV-2 antigen rapid detection tests and provides interim guidance on clinical indications and

target populations, assay selection, evaluation, test interpretation and limitations, and pre-analytical considerations. We hope this information aids in the successful implementation of rapid antigen testing protocols to assist global efforts in identifying and isolating SARS-CoV-2 cases earlier.

While the pandemic lingers on, there is optimism that life may return to some normalcy in some parts of the world later this summer or fall. I hope we can all focus on the positive and get excited for the future yearly IFCC conferences, startup of the new IFCC programs, and much more. Should you have any feedback, questions, or concerns, please feel free to email me at: president@ifcc.org.

Till next time ☺ Khosrow

C-MHBLM: succeeding in the AI new reality in lab medicine

by Bernard Gouget, C-MHBLM Chair Pradeep K. Dabla, C-MHBLM member Damien Gruson, EC-ETD liaison Sergio Bernardini, EC-ETD Chair

Laboratory Medicine is changing fast. The pandemic has brought science fiction down to the ground and has facilitated the adoption of many digital health technologies since the beginning of 2020 bringing unprecedented challenges. In the stressful health context while the pivotal question is still the fight against the virus the C-MHBLM demonstrated a very dynamic energy to continue its scientific works. Plenty of digital technologies have suddenly become widely accepted and interestingly so, not only to health professionals but to the general public as well. The question for the C-MHBLM is how this cultural transformation is integrated in Lab medicine and how to use digital health in practice. As mobile healthcare apps matured, we realized the real power of smartphones, the potential of remote care, telemedicine, contact tracing, home tests, robots and drones to reduce the risk of contamination for humans. There is little doubt that artificial intelligence (AI) will play a larger and greater role in its future development.

The COVID-19 crisis made Committee switch overnight to online continuing education. Attempts were made to create solutions for online active learning, and promote online members interactions. We have learned, shared our stories, and shared our resources with others, tuned in to videos and podcast conversations,

connected with our IFCC online community. Thanks to the IFCC office and to Silvia Colli-Lanzi for her expertise and her time to coordinate the virtual activities. Following the IFCC survey on mobile health and digital diagnostics, the C-MHBLM organized three e-workshops with national and international audience to boost our professional development in digital health, to network in e-Learning with other professionals, and to gain the latest insights from IVD industry featuring an interactive discussion. We were excited to introduce the first one entitled: «Big Bang of digital transformation» during the francophone congress of medical biology (JFBM, Nov 24, 2020) with representatives from the Expert Panel at the European Commission, and the cofounder of the spin-off company DNAlytics. The other two were organized during the virtual edition of the Journées de l'innovation en Biologie (JIB 2020, Dec 10), on «Navigate lab medicine's and digital transformation» with the participation of the Head of MedTech Europe, the Head of Digital solutions from Roche International - C-MHBLM member and members of the EC-ETD. A third one was also organized during the JIB 2020, on Dec 11th, focusing on "E-cardiology and Lab Medicine" with the participation of European Society of Cardiology (ESC) Representatives, cardiologists from Belgium and Clinical Chemists from India.

Three inter-regional C-MHBLM webinars were organized: On July 8th: "The Covid 19 and the heart prognostic value of cardiovascular biomarkers and e-management of cardiac injury"; on July 28th: "Myths and truth about immunity against CoV2: are biological tests the Key?" and on Sept 22th: "Al and cardiac biomarkers trends".

Two papers were published, the first one in Clinical Chemica Acta (Collaborative AI and lab medicine, Integration in precision cardiovascular medicine, vol. 509, Oct 2020, p 67-71); and the second in Annals of Lab Medicine (Sustainability in Healthcare: Perspectives and reflections regarding Lab Medicine; Ann Lab Med 2021; 41(2): 139-144). Fifteen IFCC Points of view were published in the IFCC e-Newsletter in 2020.

At the beginning of the spring of 2021, flexibility and agility are key concepts for the work of the committee in attracting the right talent. We are happy to welcome Mag. Evgenija Homšak, as new corresponding member (Slovenia). After bi-monthly video-conferences with the Chair of the IFCC EC- ETB in order to discuss the strategic plan for the C-MHBLM, it was decided first, that the committee will continue to explore the digital transformation in Health, focusing on its impact on the evolution of the Lab medicine and patient outcomes. With COVID-19 accelerating digital transformation, consumer expectations for an easier access online are rising. Telemedicine and digital health technology continue to gain more and more acceptance among patients and health care professionals alike. Mobile devices are becoming more powerful with every generation introducing secure links to back-end cloud systems. There are now many devices, applications and tests that can provide data about our daily condition, health status and genetic background. Incorporating this data into the medical practice will be a quantum leap. By taking advantage of new technology, specialists of lab medicine professionals have the chance to be at the forefront of health care delivery by expanding services to share their insight with patients independent of geography. Al is moving beyond just the cloud.

With powerful AI algorithms enabled on devices from smartphones to consumer machines, to robots and more, we are unlocking a world of intelligent, connected devices that can perceive, reason, and take intuitive actions based on awareness of the situation. In a way, the connected devices with AI will allow the transition from preventive surveillance to adaptive and predictive surveillance; in favor of better reactivity of the lab medical staff in the event of a problem.

Secondly, and during the last videoconference with Sergio Bernardini, it was discussed that AI can have far-reaching use in healthcare and effectively play a proactively role in acting as the digital front door for laboratories. It was decided to engage the C-MH-BLM in the writing of a review on AI technologies and m-Health Tools in Laboratory Medicine and their significant potential to improve patient care and to deliver even greater benefits in the future.

Thirdly and the last point, communication at scientific events is always an opportunity to promote the work of the IFCC functional units. The C-MHBLM participated at the IFCC Global Virtual Conference "Critical Role of Clinical Laboratories in the Covid-19 Pandemic" on February 15th, 2021 in chairing the symposium 2: Emerging Tools in Fighting COVID-19.

The C-MHBLM members have already received invitations to participate in:

- 8th International Symposium on Critical Care Testing and Blood Gases, Biarritz June 10-11, 2021
- Roma Ter Vergata: September 2021, 6-7:
 POCT: Making The Point, Roma (IT)
- Journées Francophones de Biologie médicale (5e JFBM) Rennes (FR) Oct 6: Session: For a heavy dose of digital to deliver high performance in a new healthcare landscape.
- EuroMedLab München 2021, Dec 1st;
 Viewpoint 6 17:00-18:00: Regulating direct-to-consumer testing 2.0: Protecting the consumer.
- Journée de l'innovation en biologie (JIB) Dec 8-11, Paris (topics tbd)
- COLABIOCLI March 28 April 2, 2022: session on «AI, Big Data and wearable technologies: closing gaps in patient data and care.»

The COVID-19 pandemic has changed how humans interact with each other, and these changes are likely to persist. We must adapt to the new reality. The Forthcoming conferences will be probably different from those of yore, the mold is broken. Nevertheless, it is exiting to imagine different congresses, with a different structure and different outcomes. It will always be a pleasure to interact with you face to face or virtually to discuss on the future of AI and Digital Healthcare. In case you are interested in participating in our activities, feel free to contact us: https://www.ifcc.org/ifcc-emerging-technologies-division/etd-committees/c-mhblm/.

The new IFCC initiative to strengthen lab quality globally: a challenging goal with rewarding promises for member states

by Prof. Egon Amann

IFCC Task Force on Global Lab Quality (TF-GLQ) Chair University of Applied Sciences Hochschule Hamm-Lippstadt Marker Allee 76-78 59063 Hamm DE

Dr. Qing Meng

IFCC Task Force on Global Lab Quality (TF-GLQ) Chair Clinical Chemistry and Special Chemistry Laboratories Department of Laboratory Medicine The University of Texas MD Anderson Cancer Center Houston, TX, USA

With the beginning of the year 2021, the IFCC Executive Board has established the new Task Force on Global Lab Quality (TF-GLQ). This international TF that comprises 15 members and eight corresponding members has started its operative work.

What is the rationale for this new global initiative?

High standards of laboratory quality are not met in all countries. The ultimate goal of the TF's work is to implement an international IQC and EQA program to improve the overall quality of laboratory practices on a global scale.

Two initiatives are currently being pursued:

- A survey was conducted in which member states answered questions on their countries' actual situation concerning IQC and EQA programs and on their willingness to participate in a pilot project.
- An initial request for proposals was circulated to vendors of IQC materials and EQA programs and interest to provide such materials was expressed by a number of commercial and not-for-profit vendors.

The survey

The response rate to the survey was remarkable: 54 responses were received from IFCC national societies (response rate: > 50%), of which several expressed interest to participate in the pilot program. Based on individual countries' most urgent needs to improve lab quality, ten countries from Europe, Africa, Latin America and Asia have been selected to participate in the pilot program. Each of those ten countries can appoint up to five participating laboratories for the pilot program.

The test menu

The TF-GLQ discussed most suitable tests and proposed a test menu for the pilot program: From 25 finally selected tests, eight are immunoassays and 17 tests represent a comprehensive metabolic panel. Next TF-GLQ working steps include the fine-tuning of individual country programs (not all participating laboratories may want to apply all 25 tests).

Suitable vendors

In order to obtain a more accurate proposal from possible vendor partners, TF-GLQ will provide specifics on the pilot program to vendors and need to decide whether regional or global solutions are more meaningful.

For example, EQA solutions may be procured more regional (several vendors), whereas IQC materials could be supplied globally (one or few vendors). Once decided, vendors must be chosen through an open-bidding process to provide EQA materials and software for the EQA program.

IFCC sponsored pilot project

In contrast to the previous DQCML program (Developing Quality Competence in Medical Laboratories), IFCC will financially sponsor the pilot program: Participating labs will receive the IQC materials (i.e., standards and controls) and EQA logistics free of charge.

Other TF-GLQ tasks

There are many remaining tasks to be addressed, including:

- Understand requirements of country-specific issues and training needs.
- Assign scientific support teams to train and support staff on site at participating laboratories.
- Plan for maintenance and monitoring of the IQC program by IFCC.
- Through on-site visits, evaluate the preparedness of the participating laboratories for subscription to the EQA program and identify gaps that must be addressed.
- Develop detailed written guidelines for the participating laboratories.
- Dispatch scientific support teams to help initiate the EQA program at the participating labs. Expert teams will be formed by the taskforce from IFCC membership and will include both senior and young scientists.

For more information, please follow this link:

https://www.ifcc.org/executive-board-and-council/eb-task-forces/task-force-on-global-lab-quality/.



The Task Force GLQ members during their inaugural meeting.

Prof. K. Adeli, IFCC President and Prof. D.Kinniburgh, IFCC Secretary, participated in the meeting.

IFCC - EBLM Committee report on CAHOLABCON

by Dr. Seema Bhargava

Member, IFCC-EBLM Committee Chair and Senior Consultant Department of Biochemistry & Professor, GRIPMER Sir Ganga Ram Hospital New Delhi, India



The Consortium of Accredited Healthcare Organizations (CAHO) is an organization dedicated to promoting the implementation of quality and capacity building in healthcare organizations (www.caho.in). It is a common platform that facilitates communication amongst the accredited Healthcare Organizations (HCOs), shares best practices, and provides benchmarking, while promoting and continuously improving the quality and safety of healthcare services provided by the HCOs across India.

Recently, CAHO has instituted a diagnostic division to focus on the journey of quality in all diagnostic disciplines. Dr. Seema Bhargava (Member, IFCC-EBLM committee, Chair of the Department of Biochemistry at Sir Ganga Ram Hospital, New Delhi, India, and Member Accreditation Committee of National Accreditation Board for Testing and Calibrating Laboratories) was appointed as first Chair. She is supported by a very efficient team of diagnostic experts including Dr. Aparna Jairam (Founder and Director-Asavlee, Dr. Aparna's Pathology Lab &

CEO-Immucare labs Pvt Ltd), Dr. Sankar Sengupta (Medical Superintendent, BM Birla Heart Research Centre, Kolkata) and Dr. Suvin Shetty (Laboratory Head at Dr. L H Hiranandani Hospital, Mumbai). This division is working under the guidance of Dr. Vijay Agarwal (President CAHO) and Dr. Lallu Joseph (Secretary General CAHO).

This team organised "The first International Diagnostic Conclave of CAHO" on the theme 'Strategic Planning in Quality Management' which was held on 27th March 2021. IFCC and NABL were the knowledge partners for this one-day virtual conference which focussed on the recent developments in laboratory testing & radiology, quality management of assays and quality tools, as well as addressed the challenges in Laboratory Quality Management. Conclave was attended by over 320 delegates.

The Chief Guest was Dr. Priya Abraham, Director, ICMR Institute of Virology, Pune, India; in keeping with the current Covid-19 pandemic, she delivered her inaugural address titled "Making of the indigenous vaccine".

Dr. Annalise Zemlin, Chair IFCC C-EBLM, was invited to speak on "EBLM and laboratory audits as quality tools". Her lecture was very well-appreciated and generated an interesting discussion.

It is hoped that the future will see collaborations between IFCC and the diagnostic division of CAHO in the field of Quality Assurance and its Implementation. Masterclasses, courses, CMEs and other types of programmes could be conducted towards the dissemination of quality in healthcare, especially diagnostics.



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N ^O 12	December	

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IFCC celebrates the Medical Laboratory Professionals Week

by Prof. Rajiv Erasmus (ZA) C-PR Chair

Dr. Peter Vervaart (AU), Prof. O. Agbedana (NG)
Dr. Khushbu Patel (USA), Dr. Maria del Carmen Pasquel Carrera (EC)
C-PR Members

Prof. T. S. Pillay (ZA)CPD Chair





The International Federation of Clinical Chemistry and Laboratory Medicine (IFCC) was pleased to celebrate Medical Laboratory Professionals Week from 18th to 24th April, 2021, highlighting the vital role of the medical laboratory and the significant contributions of medical laboratory professionals.

One of the roles of the IFCC Committee on Public Relations (C-PR), a Committee of the IFCC Communication and Publications Division (CPD), is to promote the activities of the IFCC to national and international organizations and the community at large. This year several member societies produced videos and organized webinars to celebrate this week

All the events videos and webinars) marking this day can be followed on: https://www.ifcc.org/ifcc-communications-publications-division-cpd/cpd-committees/happy-laboratory-professionals-week-2021/.

Dr. Eduardo Freggiaro (CPD Committee) from Argentina and his institution was instrumental in designing the Lab Professionals Week page which is displayed prominently on the IFCC website. This was indeed a great effort and deeply appreciated by the IFCC.

The Laboratory Professionals Week webpage opens with a video message from the IFCC President followed

by another that is accompanied by a catchy song and consolidates messages from across the globe with the title of "Happy Lab Professionals Week" and then several other ones from many IFCC member societies across the globe. Many Young Scientists highlighted the role of lab professionals in disease diagnosis and management which were magnified during the COV-ID-19 pandemic.

Many webinars to celebrate the Lab Professionals Week were organized by national societies and federations. IFCC President moderated the webinar organized by Dr. Ashlin Rampul, Coordinator of Young Scientists from the African Federation of Clinical Chemistry (AFCC) which consisted of five talks given by Young Scientists from South Africa, Zambia, Morocco and Nigeria.

IFCC President, Prof. Adeli was delighted by all these efforts and remarked that IFCC should use the Lab Professionals Week to highlight the activities of IFCC. The C-PR agrees with this and will shortly put up a strategic plan to enhance these activities.

The C-PR Committee received numerous feedback messages and we would like to thank the numerous actions taken by some of our national societies and federations to make this a memorable event.

IFCC History Book 2002-2022 - call for submissions

Prof. Mathias M. Müller Dr. Bernard GougetCo-Chairs, IFCC-TF on History

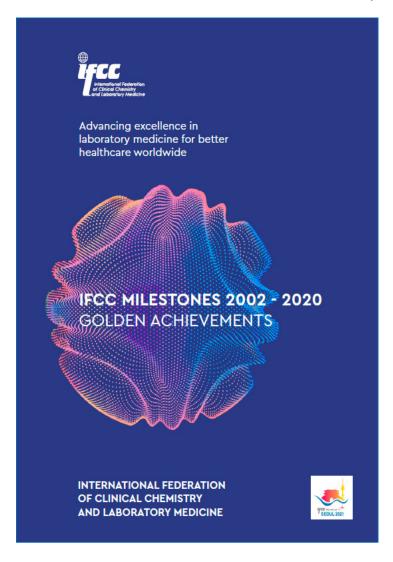
Dear Colleagues and Friends,

IFCC, as the leading international professional and scientific organization of laboratory medicine, has always being known as a multidisciplinary and integrative organization, attentive to the evolution of the profession.

IFCC is more than ever at the heart of innovation and advancement in lab medicine sciences and biotechnologies. Such success is owned to its members, specialists of Lab medicine, as well as to the IFCC national Societies, Regional Federations and other partners.

IFCC and its Corporate members and membership have evolved a lot in their organization and objectives since the 50th anniversary IFCC History edition, coordinated by John Lines. After the publication of the IFCC Milestones 2002-2020, available on the IFCC website at: https://www.ifcc.org/executive-board-and-council/ifcc-milestones-2002-2020/, with Prof. Mathias M. Müller, we began writing the IFCC History Book 2002-2022 to celebrate the 70th anniversary of IFCC.

We would like to include new chapters on the history, new goals, organization, research activities of the IFCC regional federations and their membership in this new publication.



As you know, it is always difficult to collect information. This is the reason why we will be very happy to receive from you a few pages (>10 pages) with illustrations that give an idea of the evolution of the IFCC regional Federations representing "sub-regions", as well as information from national full members or affiliate organisations since the beginning of the 21st century. Contributions from corporate members are, more than ever, expected and invited.

The goal is to gather as much information as possible to highlight the will and expertise that each member contributes to the IFCC. Your participation in this publication is a guarantee of success to reflect the clear IFCC identity.

We are looking forward to reading you by end of June at the beginning of the summer 2021. We are always at your disposal to give you any further information.

Thank you very much in advance for your contribution. Please contact the IFCC office (ifcc@ifcc.org), if needed.



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- [1] Padoan A, Plebani M, et al. Analytical and clinical performances of a SARS-CoV-2 S-RBD IgG assay: comparison with neutralization titers[J]. Clinical Chemistry and Laboratory Medicine (CCLM), 2021.
- [2] Quoted from the clinical sensitivity study in MAGLUMI® SARS-CoV-2 Neutralizing Antibody IFU.

IFCC: THE PEOPLE

IFCC call for nominations



The IFCC invites nominations for the following position:

EDUCATION AND MANAGEMENT DIVISION

Committee on Education in the Use of Biomarkers in Diabetes (C-EUBD): two member positions

- ☐ Time in office 2021-2023.
- □ Deadline to receive nominations and supporting documents: 31 May 2021.

EMD nominations should be sent to Silvia Cardinale at the IFCC office (cardinale@ifcc.org).

Refer to your National Representative or Corporate Representative for information on procedures for nominations. More info about contacts available HERE.

IFCC Webinars

Live Series 2021





Register for the next IFCC webinar!

Dear Colleagues,

The next IFCC webinar on "Risk Management in Clinical Laboratories" will be held on May 10, 2021.

This webinar will provide an overview of risk management in healthcare focusing on clinical laboratories. The presentations will provide an explanation of how risk management is done and highlight risk management frameworks like Failure Modes and Effects Analysis (FMEA), Root Cause Analysis (RCA), and others. The webinar will contain three presentations of 20 min per speaker plus 20 min panel discussion.

- **□** Talk 1:
- □ Overview of Risk Management
- □ Speaker: Dr. Merve Sibel Gungoren [Turkey]

Talk 2:

□ Process of Risk Management

□ Speaker: Prof. Praveen Sharma [India]

○ Talk 3:

□ Risk Management and Continuous Improvement

□ Speaker: Prof. Edward Randell [Canada]

Chairperson: Prof. Sedef Yenice [Turkey]

Register here: https://www.workcast.com/register?cpak=3071202974282642.

Time Zones: Live presentations starting at 6:30 PM India Time; 9:00 AM Eastern Time US; 3:00 PM Central European Time.

Important: Please ensure that you carefully determine the time that the presentation will start in your global time zone. To calculate this, you can use the time zone converter tool at: www.timeanddate.com/worldclock/ converter.html.

Recorded webinar: available on demand

Certificate of Participation: available for all registrants

Please ensure you register to attend the live event and have access to the recording and the certificate.

Sincerely yours,

Rojeet Shrestha

Co-ordinator, IFCC eLearning/eAcademy

IFCC Live Webinar on

Risk Management in Clinical Laboratories



REGISTER AT:

https://www.workcast.com/register?cpak=3071202974282642



Prof. Sedef Yenice [Turkey] Demiroglu Bilim University and G Florence Nightingale Hospital

Overview of Risk Management



Dr. Merve Sibel Gungoren [Turkey] Duzen Laboratories Group

Process of Risk Management



Prof. Praveen Sharma [India] All India Institute of Medical



Risk Management and Continuous Improvement



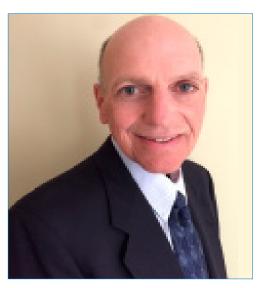
Prof. Edward Randell [Canada] Eastern Health Authority and Memorial University

Date: May 10, 2021 [Monday]

Time: 06:30 PM (India), 3:00 PM (Central European), 09:00 AM (US Eastern time)

Welcome and thanks to the Chairs

WELCOME TO JOSEPH PASSARELLI (US)



Joseph Passarelli

Joseph Passarelli (US) is the new Corporate Representative on the IFCC's Executive Board.

Joseph Passarelli is Senior Director, Scientific Relations at Roche Diagnostics. In this role, he represents Roche as a scientific liaison to professional societies and standard- and guideline-setting organizations worldwide. He has worked both domestically and internationally in research and development for more than 35 years and has experience in discovery, research, development, laboratory management, technology transfer, regulatory submissions, and market commercialization.

Mr. Passarelli is currently the corporate representative on the IFCC's Executive Board. He also has served as the Secretary to the Scientific Division Executive Committee with his term ending in December 2020 and before that as SD's corporate representative. He is also a member of the Harmonization Oversight Group of the International Consortium for Harmonization of Clinical Laboratory Results (ICH-

CLR). His interests and responsibilities include educating and promoting the value of assay standardization and harmonization using recognized standards and guidelines and collaborates extensively with professional organizations worldwide.

In addition to these activities, Mr. Passarelli currently serves on the CLSI Board of Directors as one of its Officers – Secretary. He also serves as a member of the US Technical Advisory Group to ISO Technical Committee 212 – clinical laboratory testing and in vitro diagnostic test systems.

Thank you for serving as Secretary to the Scientific Division Executive Committee and best wishes for your new role within the IFCC EB!

WELCOME TO GARRY JOHN (UK)



Garry John

Garry John (UK) is the new Secretary of the Executive Committee of the Scientific Division (SD).

Garry has held senior positions in UK hospitals for 30 years and has driven change locally and nationally. In addition to leading the Department of Clinical Biochemistry within the Norfolk and Norwich University Hospital, he has been Clinical Director, Associate Medical Director and Director of Research. He is additionally an Honorary Professor in the Norwich Medical School. Garry has had an influence on scientific work nationally and internationally; he has served on ACB Council and his interest in quality has been demonstrated by his significant involvement in UK EQA Schemes (UKNEQAS and WEQAS).

But most notably Garry has had a long and successful association with the International Federation of Clinical Chemistry and Laboratory Medicine; he has chaired three active committees: first a Working Group (WG) on Haemoglobin A1c standardisation, the first WG to fully complete all tasks allocated; then a Task Force on implementation of HbA1c standardisation where he worked closely with manufacturers and professional organisations achieving global standardisation. He also chaired a committee within the Educational Division on Education in the use of Biomarkers in Diabetes. He is widely recognised and respected within the scientific community and has a long experience in delivering results.

Thank you for your committment within the C-EUBD and best wishes as the new Secretary of the IFCC Scientific Division!

WELCOME TO EMMA ENGLISH (UK)



Emma English

Emma English is the new Chair of the IFCC EMD C-EUBD.

Dr. Emma English is Director of Postgraduate Research for the School of Health Sciences, University of East Anglia.

Emma graduated with a BSc in Microbiology and Medical Biosciences from the University of Kent before undertaking a PhD at the University of East Anglia investigating the role of electron transfer chains in *Azorhizobium caulinodans*. Wanting a more applied health role, she then trained as a Clinical Scientist at Addenbrooke's Hospital in Cambridge. Whilst at Cambridge she undertook an MSc in Clinical Biochemistry at University College London. She successfully gained registration with the Health and Care Professions Council and has entered on the national register as Clinical Biochemist.

Emma's research focuses on the use of diagnostic testing in health and disease, with three interrelated themes of; analytical quality of diagnostic testing, clinical utility of diagnostic tests and development of future diagnostic tests. Current focus is around diabetes testing.

Key external links include the WHO, International Diabetes Federation, International Federation of Clinical Chemistry and Laboratory Medicine.

Key topics of interest:

- Point of Care testing for diabetes
- Global quality standards and policy
- Clinical utility of diabetes biomarkers

Best wishes as Chair of the IFCC EMD C-EUBD!

Change of the guard at ICHCLR



Dr. Gary Myers

FAREWELL DR. GARY MYERS (US)

Dr. Gary Myers (US) was ICHCLR Council Chair.

Dr. Gary Myers, PhD is retired from the United States Centers for Disease Control and Prevention (CDC) where he served as Chief of the Clinical Chemistry Branch. During his 33+ year career at the CDC he directed programs to improve and standardize the laboratory measurement of biomarkers used to assess chronic disease status. He served as Chair of the Council of the International Consortium for Harmonization of Clinical Laboratory Results (ICHCLR) from its formation in 2013 through 2020. He remains a member of the ICHCLR Council as the representative from the American Association for Clinical Chemistry (AACC). He previously served as Secretary for the IFCC Scientific Division. He is a former Chair of the Joint Committee for Traceability in Laboratory Medicine (JCTLM) and currently serves as the IFCC representative to the JCTLM Executive Committee. He served as President of the AACC in 2007.

Thank you, Dr. Myers, for your commitment towards leading this important project, sharing your expertise and knowledge!



Prof. Sverre Sandberg

WELCOME TO SVERRE SANDBERG (NW)

Sverre Sandberg (NW) is the new "Council Chair" ICHCLR.

Pofessor Sverre Sandberg MD, PhD is director of the Norwegian Quality Improvement of Laboratory examinations (NOKLUS) and the Norwegian Porphyria Center (NAPOS)

He has been president of the European Organization for External Quality Assurance Providers in Laboratory Medicine (EQALM), president of the European Federation of Clinical Chemistry and Laboratory Medicine (EFLM) and has been a board member of IFCC. He is currently the president of the European Porphyria Network association (EPNET), chair of the council of ICHCLR and chair of the Task Group in EFLM for the Biological Variation Database. He also participates in other WGs in EFLM and IFCC. His professional interests are in porphyria, evidence-based laboratory medicine, quality improvement of point of care instruments, biological variation, analytical performance specifications.

Welcome on board, Dr. Sandberg!

THANK YOU TO GREG MILLER (US)

Greg Miller (US) is the current JCTLM Chair and SD Consultant.

Greg Miller, PhD is a Professor in the Pathology Department at Virginia Commonwealth University where he serves as Co-director of Clinical Chemistry and Director of Pathology Information Systems. He chaired the Harmonization Oversight Group of the ICHCLR from its inception in 2013 through 2020 and remains as a member. His current professional activities include: Associate Editor of the journal Clinical Chemistry, Chair of the Joint Committee for Traceability in Laboratory Medicine, Chair of the Working Group for Commutability in Metrological Traceability of the IFCC, Chair of the Laboratory Working Group of the National Institute of Diabetes and Digestive and Kidney Diseases, National Institutes of Health (US), a member of the US delegation to ISO Technical Committee 212 for Clinical Laboratory Testing and In Vitro Diagnostic Test Systems, and other work groups for clinical laboratory standards. He is a past-president of the American Association for Clinical Chemistry and of the Clinical and Laboratory Standards Institute.



Prof. Greg Miller

Thank you for your hard work as Chair of the Harmonization Oversight Group – HOG, and best wishes as JCTLM Chair & SD Consultant.

Prof. Ian S. Young

WELCOME TO IAN S. YOUNG (UK)

Prof. Ian S. Young, Professor of Medicine, Queen's University Belfast (UK) is the new HOG (Harmonization Oversight Group) Chair and the ICHCLR Observer within the IFCC Scientific Division.

Ian Young is Professor of Medicine at Queen's University Belfast, and Deputy Medical Director and Consultant Chemical Pathologist at Belfast Health and Social Care Trust. In addition, he is Chief Scientific Advisor to the Department of Health, Northern Ireland, and Director of Research for Health and Social Care, Northern Ireland. His main clinical and research interests are in nutrition and lipid metabolism, particularly in relation to cardiovascular disease prevention and management of patients with complex lipid disorders. He is author of over 400 published research papers. He is Past-President of the Association for Clinical Biochemistry and Laboratory Medicine, UK, and previous Chair of the Joint Committee for Traceability in Laboratory Medicine (JCTLM). He is currently Chair of the UK Government's Scientific

Advisory Committee on Nutrition. He is Associate Editor for the journal Clinical Chemistry, and a member of the editorial boards of several other international journals.

Best wishes for many successful results to the new HOG Chair!

Obituary: Professor Claude Dreux (April 2nd 1929 - March 16th 2021)

by Bernard Gouget IFCC co-Chair TF on History



Professor Claude Dreux

Claude Dreux was intern in pharmacy in 1951, graduated as Pharmacist in 1952 and Doctor in Sciences in 1962. He was appointed as full Professor in Biochemistry in 1973 at the Faculty of Pharmacy, avenue de l'Observatoire Paris V (FR). He served as Dean of the Faculty of Pharmacy from 1992 to 1997 and later on as Honorary Dean of the Faculty and Honorary Vice-President at the University René Descartes (Paris V). Many of his trainees (Jean Fiet, Bernard Bousquet, Jean-Marie Launay, Jacques Callebert, Jean-Louis Laplanche, and Jean-Pierre Garnier) have held professors' position at this Faculty.

He was Head of the Clinical Laboratory and Pharmacy (1962-1979) at the Saint-Louis Hospital-Assistance Publique - Hôpitaux de Paris, and later Director of Biochemistry and Neurobiology Department at the same University Hospital from 1979 to 1994. He collaborated closely with Prof. Jean-Emile Courtois who was IFCC President from 1963 to 1967 as well as with the IFCC President Prof. Gérard Siest (1991-1996) to enhance laboratory medicine leadership in improving healthcare at international level. He participated when Prof. Pierre Valdiguie, was FES-CC President (1991-1993) in the success of the "EuroLab 93" (previous name of EuroMedLab), 10th IFCC European

Congress of Clinical Chemistry, 12th SFBC National meeting. Nice, France, April, 1993. With a very keen mind, he contributed as President to the notoriety of the Société Française de Biologie Clinique (SFBC) initiating outstanding contributions to laboratory medicine studies encouraging publications of recommendations promoting the quality of care. He established strong links with institutions, agencies, and government services to promote the added value of the profession.

Prof. Claude Dreux's research has spanned broad areas in Laboratory Medicine. He made many original and significant contributions to the fields of hormonal biology, molecular neurobiology, as well as of biological changes during tumor processes. The most recent publications were devoted to pathological changes in psychiatric diseases and neuroendocrine tumors; neurodegenerative diseases of viral or prion origin; normal and pathological metabolism of steroid and peptic hormones. His latest research interests included the pharmacokinetics, metabolism and metabolic effects of various drugs, especially anti-cancer psychotropic drugs and hormones.

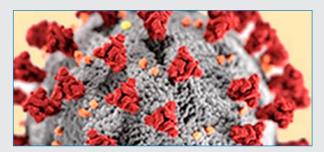
He published over 200 articles and delivered many opening and keynotes lectures at national and international conferences.

Prof. Cl. Dreux was President of the French Pharmacy Health and Social Education Committee (Comité d'éducation sanitaire et sociale de la pharmacie française (Cespharm)) from 1999 to 2015. The Cespharm aim is to help pharmacists getting involved in prevention, health education and therapeutic patient education. He was Expert of the National Pharmacopoeia commission and, also Member of the advisory committee to the European Communities for the training of Pharmacists.

Prof. Cl. Dreux was Member of the "Académies nationales de Médecine et de Pharmacie ». As such, he honored us with his presence at EuroMedLab Paris 2015. He was Elected Foreign Correspondent on November 29, 1997 and foreign honorary member on June 13, 2008 at The Royal Academy of Medicine of Belgium and, Knight of the French National Order of Merit.

Thank you to Prof. Claude Dreux for collecting funds for the restoration of the Salle des Actes of the Faculty of Pharmacy of Paris: "the Sistine Chapel of the pharmacy". The Hall of Ceremonies is a place of great beauty which bears witness to the history of French pharmaceutical sciences: a delight for the eyes and of great historical interest where it is possible to discover, among other things, the portraits of those who contributed to the development of Pharmaceutical sciences, from the beginning of the 17th century to the present day... This is a place for you!

News from the IFCC Website



The IFCC is pleased to publish an online resource providing key information on laboratory guidelines, biosafety, and other important resources to assist member societies around the world and their clinical laboratories as they face the challenges posed by the COVID-19 outbreak.

The page is constantly updated with the most recent information on a biweekly basis.

IFCC Information Guide on COVID-19 – biweekly updates – the NEW SECTION on VACCINATION has been updated

Coronavirus disease 2019, abbreviated to COVID-19, is an emerging global pandemic caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). As the number of individuals infected with COVID-19 continues to rise globally and healthcare systems become increasingly stressed, it is clear that the clinical laboratory will play an essential role in this crisis, contributing to patient screening, diagnosis, monitoring/treatment, as well as epidemiologic recovery/surveillance. This guide aims to organize relevant available information on laboratory screening, testing protocols, diagnosis, and other general information on COVID-19 for laboratory professionals, including links to helpful resources and interim guidelines. It will be continually updated as new guidelines and literature become available. Further to the VACCINATION section, the latest update includes various recent publications that have been published in the past two weeks in: • Antigen Testing • Serology Testing (Diagnostic Testing section).

Read more

CONTRIBUTE TO THE IFCC eNEWS

Austrian social health insurance fund Österreichische Gesundheitskasse receives global recognition for achievement with Healthcare Excellence Award





Pictured from left to right, at Hanusch Hospital: Andrea Schlögl, Felix Keil, Erol Holawatsch, Nazanin Sédille-Mostafaie, Elisabeth Zwettler

New problems require new solutions and in early 2020, nothing was more novel than the unanticipated coronavirus. Accordingly, healthcare leaders across the globe united in new ways in order to help fight this deadly coronavirus. In Vienna, Austria Österreichische Gesundheitskasse (ÖGK), the largest social health insurance fund in Austria, were not only leaders in collaboration but in ideation with respect to new business models to help fight the spread of COVID-19.

ÖGK appreciated how paramount it was to ensure availability of health services, and maintain the health and safety of their workers, patients, and community. Thus, a multidisciplinary team comprised of laboratory medicine, hygiene, infection control, and clinicians immediately prepared a safety concept to be rolled out across all ÖGK sites and Hanusch Hospital.

This comprehensive safety concept includes SARS-CoV-2 PCR testing, separate entrances for healthcare workers and patients, with patient entrance control and protective face coverings. In advance of any admission, all patients are screened for COVID-19. For all ambulatory patients and ÖGK healthcare workers, COVID-19 testing is performed if there is any suspicion of infection.

Despite the ongoing COVID-19 pandemic, ÖGK health centres and Hanusch Hospital were able to safely reopen to approximately 90% capacity by end of July 2020 with no uncontrolled transmission for patients and healthcare workers. This is of particular importance to at-risk patient groups and the clinicians who serve them. "Hanusch hospital is a focus hospital for oncological patients. Fear of the virus prevented many patients from seeking the care they needed. Early lock down in Austria allowed for implementation of effective safety measures for continued treatment for our most vulnerable oncological patients during the COVID-19 pandemic without risk. Infection rate in the hospital is low and fast testing allows identification of active infections in patients to avoid any further spread" Says Felix Keil, MD, Head of Hematology-Oncology at Hanusch Hospital.

The integrated clinical care team who led this clinical care initiative was recently honored (in person) for their achievements and recognition through the UNIVANTS of Healthcare Excellence awards program. Congratulations Nazanin Sédille-Mostafaie, *MD*, *MBA*, *Head of Institute for Laboratory Medicine at Hanuschkrankenhaus*, Johann Bartko, *MD*, *PhD*, *Specialist for Medical and Chemical Laboratory Diagnostics, Felix Keil*, *MD*, *Head of Hemato-Oncology, Hanusch Hospital*, Andreas Krauter, *MD*, *Head of Medical Services, Member of the ÖGK General Management*, Andrea Schlögl, *MD*, *Management Hanusch hospital and ÖGK healthcare centers*, Elisabeth Zwettler, *MD*, *Director Hanusch hospital and ÖGK healthcare centers*.

KEY TAKEAWAYS:

- 1. Strategic, rapid and comprehensive implementation of SAR-CoV-2 testing within healthcare settings can substantially mitigate disease transmission.
- 2. Acting upon valued data for COVID-19 screening enables safe best practices for healthcare services, even in the face of the COVID-19 pandemic.
- 3. Collaborative efforts across 'untraditional' care teams can lead to novel thinking, opportunities and ultimately measurably better healthcare.



NHS Tayside receives global recognition for efficient and effective investigation of patients with new bowel symptoms using faecal immunochemical tests (FIT)





Pictured from left to right: Craig Mowat, Lynn Taylor, Ian Kennedy and Judith Strachan

Bowel symptoms are often difficult to assess as patient presentations can vary from bleeding, palpable masses, iron deficiency anemia to non-specific symptoms. Thus, patients often require further investigation through colonoscopy to diagnoses or rule-out significant bowel disease, including colorectal cancer.

At NHS Tayside in Dundee, Scotland, approximately 4000 patients/year are referred for colonoscopy. However, the prevalence of significant bowel disease is low, with colorectal cancer found in only 2% of patients and inflammatory bowel disease diagnosed in 5%. Despite the low prevalence of disease, 35-40% of all colonoscopy referrals were marked as "urgent" or "urgent, suspected cancer". Thus, a significant opportunity existed to improve the investigation pathway for patients with bowel symptoms.

Use of faecal immunochemical tests (FIT) was integrated into the Colorectal pathway at NHS Tayside through the collaborative efforts of Primary Care Physicians, Surgery and Gastroenterology departments, Information Technology (IT), Health Records and Laboratory Medicine. The substantial benefits of this program have been recently published, highlighting that by using a low faecal hemoglobin (fHb) as an indicator of risk for significant bowel disease, the rates of referral for colonoscopy have decreased by 15% over 12 months (1). As such, 2,521 patients have been able to seek care in the community, without the delays and discomfort associated with colonoscopies, or the risks associated with not having one.

Further, in patients with fHb ≥10 the prevalence of significant bowel disease was 32.3%, compared to 6.6% in those with fHb <10. Consequently, patients with an elevated fHb had expedited investigations and management of patients was enabled though urgent colonoscopies and care.

For their impressive improvements to patient care, the innovative team behind the clinical care initiative entitled "Use of faecal immunochemical tests (FIT) unlocks the door to efficient and effective investigation of patients with new bowel symptoms" was awarded a prestigious 2020 UNIVANTS of Healthcare Excellence Award with the Designation of Distinction (2). Congratulations to Judith Strachan, BSc(Hons), FRCPath, Consultant Clinical Scientist, Blood Sciences/Scottish Bowel Screening Laboratory, NHS Tayside, Andrew Cowie, MD, Ian Kennedy, IT Manager, Blood Sciences, Craig Mowat, MD, Gastroenterologist, Lynne Taylor, Medical Laboratory Assistant. This team, along with many other valued contributors at NHS Tayside associated with the FIT undertaking, are leading best practices through collaboration and avant-garde thinking.

KEY TAKEAWAYS:

- 1. Bowel symptoms are difficult to assess, and often require a colonoscopy for fear of missing significant disease, including colorectal cancer.
- 2. Low fHb is a valued rule-out tool for significant bowel disease, whereas fHb ≥10 have a >50% risk of significant bowel disease.
- 3. Incorporating fHb into a Colorectal Pathway can substantially reduce referrals decrease costs and maximize patient experiences, all without compromising high quality care.

References

- 1. Strachan and Mowat et al. The use of faecal haemoglobin in deciding which patients presenting to Primary Care require further investigation (and how quickly) the FIT approach. eJIFCC 2021;32:1:052-060
- 2. Strain C and Ravalico TH. Laboratory medicine and healthcare excellence; Till death do us part. eJIFCC 2021; 32:1:007-019.



The Princess Alexandra Hospitals NHS Trust receives global award for healthcare excellence with strategic implementation of procalcitonin for the early recognition and management of sepsis in the emergency department



UNIVANTS

Pictured from left to right: Umanda DeThabrew, Nick Kroll, Georgia Lucas, Andrea Annoni, Angela Bartolf

Sepsis presents an ongoing challenge to health systems worldwide, with a mortality rate ranging from 20-50%. Early identification is pivotal for improving outcomes and reducing mortality. However, early identification is a challenge as patients often present with non-specific symptoms that can be difficult to distinguish from other diseases. Once sepsis is diagnosed, patients often require intense care in for substantial periods of time. Although more then half of all patients who are ultimately diagnosed with sepsis cases enter the hospital through the emergency department (ED), only about 25% are recognized and diagnosed there. Consequently, significant opportunities exist to enhance treatment and outcomes through improved early identification, particularly in the ED.

In order to improve sepsis recognition and diagnosis, an integrated clinical care team from The Princess Alexandra Hospitals NHS trust, UK implemented procalcitonin (PCT) into clinical care. The outcomes and success of this initiative have recently been published and highlight the importance of education, strategic testing and quality improvement methodologies for successful integration of this powerful marker into care (1).

Using a PCT \geq 0.2 ng/mL in the emergency department to identify patients at higher risk of mortality and longer length of stay (LOS), enables improved and accelerated treatment, comprehensive care planning by both clinical staff and family members and improves resource utilization. In patients with a first PCT \geq 0.2 ng/mL, mortality rates were 18.2% and the length of stay was 9.8 days, versus a mortality rate of 7.7% and LOS of 7.1 days for patients with PCT \leq 0.2 ng/mL.

PCT-guided diagnosis and treatment also helps ensures expedited triage. Ensuring that at least 75% of patients are admitted or discharged within 4 hours of attending the emergency department is a key performance

indicator for many hospitals, including the Princess Alexandra Hospitals NHS Trust. Following implementation of PCT, expedited triage based on four-hour performance in the ED improved from 69% (April 2019) to 78% (Oct 2019 to Mar 2020).

The importance and utility of PCT-guide diagnosis is magnified during the COVID-19 pandemic. Georgia Lucas, MD, General Practitioner Vocational Trainee notes that "PCT helped differentiate COVID-19 patients from septic patients. I was encouraged to talk about PCT and sepsis in handover on weekends because everyone that came in with a fever was suddenly COVID and we risked missing patients with sepsis".

It is evident that implementation of this novel biomarker into clinical practice can improve outcomes, expedite triage, and enhance resource utilization, but only when coupled with strategic integration across clinical departments, novel thinking, and a passion for improving care. For their extraordinary outcomes this care team has been awarded the prestigious 2020 UNIVANTS of Healthcare Excellence Award Designation of Achievement (2). Congratulations to Andrea Annoni, MD, Accident and Emergency, Nick Kroll, Data Analytics/Information Management, Helen Pardoe, MD, Consultant Colorectal Surgeon, Quality Improvement, Marie Parsons, Consultant, Department Chemical Pathology. For more details on their achievements or to learn more about the UNIVANTS of Healthcare Excellence award program, visit www.UnivantsHCE.com.

KEY TAKEAWAYS:

- 1. Sepsis and septic shock are common presentations to the emergency department and are substantial causes of morbidity and mortality
- 2. PCT-guided diagnosis and treatment can substantially enhance decision-making, improve treatment and positively affect patient outcomes
- 3. Implementation of Procalcitonin (PCT) into clinical care requires cross-departmental involvement, education and buy-in to improve patient care and outcomes

References

- 1. Pardoe et al. Procalcitonin (PCT) level in the emergency department identifies a high-risk cohort for all patients treated for possible sepsis. eJIFCC 2021;32:1:020-026
- 2. Strain C and Ravalico TH. Laboratory medicine and healthcare excellence; Till death do us part. eJIFCC 2021; 32:1:007-019.





UNIFY FOR SOMETHING GREATER



The UNIVANTS of Healthcare Excellence Award program celebrates teams who have achieved measurably better outcomes in healthcare.

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Coronavirus vaccine passports: a giant puzzle!



Dr. Bernard Gouget

is enough to reignite this spread. With an R<0.7, infections decrease and with the reduction of cases, we can hope to get the epidemic back under control. Of course, the presence of variants and a less strict lockdown can change the game. But the important thing is to go beyond living with it and move toward a strategy of suppressing the virus. Betting only on vaccines seems haphazard and risky if new variants are emerging to jeopardize the effectiveness of vaccines, if vaccines are not dispensed at the desired rate and if persistent side effects are encountered with some vaccines, imperiling population compliance. Successful countries rely on two pillars: an effective vaccination campaign and adequate measures to minimize virus circulation. It is better from a health, social and economic standpoint to resolve the crisis as quickly as possible rather than let the circulation of the virus drag on and plague society. In the public sphere, if not everyone is protected, it is necessary to maintain preventative measures.

Now that the COVID-19 vaccines are here, patients want fast access to them. They carry the promise of family and workplace reunions and new adventures. Countries are thinking about new ways to open their

by Bernard Gouget
Chair-IFCC Committee on Mobile Health
and Bioengineering in Laboratory Medicine (C-MHBLM)
co-Chair IFCC -TF on History
SFBC-International Committee
President-Human Health Care Committee-Cofrac
President-National Committee for selection of the French
Reference Laboratories, MoH

What figure will give the true measure of the calamity that has worn down our societies for more than a year? Global coronavirus cases have reached their highest levels yet, and the consequences of this surge are especially dire in India, which accounts for a third of new infections worldwide. The magnitude of the toll will not show the indirect losses either, all those invisible victims due to postponed operations and medical examinations and delays in diagnosis and treatment. This figure will also not do justice to the colossal efforts, countries, and especially health professionals, have extended to contain it. Infections from SARS-CoV-2 coronavirus are still spreading in several countries. An R just above 1

economies safely, or as safely as possible, and to allow their citizens to rediscover a safe social and work life. As COVID-19 vaccination rolls out in parts of the world, many countries have started to implement or are considering the use of COVID-19 "vaccine passports", paper or digital forms certifying that a person has been vaccinated against COVID-19, for purposes of international travel. Some countries are using them for domestic travel and/or access to certain establishments, activities, and events. The US, UK, and EU are interested, Israel has implemented it. The hope is that vaccine passports will pave the way for economic recovery and restore people's freedoms, but is it evidence-based and does it violate people's right to choose? The concept of documenting vaccinations is being taken to new levels of sophistication, and experts predict that electronic verification will soon become commonplace. There are evidence vaccine passports could motivate skeptical citizens to get shots particularly if travel companies and others moved to require proof of vaccination. Vaccine passports could unlock world travel. Countries very dependent on tourism will be able to use the passport to protect their population from the risk of contamination from the outside.

Proof of vaccination for travel is not new. Having to show COVID credentials internationally does not pose new ethical problems since the system already exists for diseases such as yellow fever. However, the coronavirus has introduced a potential need to modernize obsolete paper standards. Implementing functional vaccine passports and storing and sharing them and protecting the personal data that they contain are some of the challenges facing designers around the world. While the precise form of these vaccine certificates remains to be determined, dozens of digital applications are in the pipeline. The source of data, the storage thereof, and the information disclosed depend on the group or company that provides the tool. A paper option, with barcodes or QR codes has been proposed by a good number of these applications for people who do not have mobile phones.

The challenge is immense. For months, the entrance of travellers into many countries has been conditioned on providing negative COVID-19 test results. Currently, it is easier to obtain the results of this test than it is to prove immunization status. So, to prove that they may enter a country, travellers provide scraps of paper or emails from laboratories, sometimes in a language unknown to the people checking them, and the absence of a standardized format has led to substantial confusion. Multiple international organizations have already launched efforts to set standards and coordinate the design and implementation of vaccine passports for international travel, to coordinate among member states to provide a public health response to the international spread of diseases.

The European Commission plans to set up a digital green certificate this summer to facilitate free and safe travel in the EU during the COVID-19 pandemic. This certificate will prove that an individual has been vaccinated for COVID-19, has received a negative screening test result, or has recovered from COVID-19. It will be available free of charge, in electronic or paper form, and will include a QR code to ensure its security and authenticity. The Commission will set up a portal to ensure that all the certificates can be verified throughout the EU and it will support Member States in the technical implementation of the certificates. The digital certificate will not discriminate against those who have not been vaccinated; the

Commission proposes creating not only an interoperable vaccine certificate, but also certificates for COV-ID-19 screening tests and certificates for people who have recovered from COVID-19.

The U.S. government is exploring COVID-19 vaccine certifications for use internationally and domestically. The administration has said that a vaccine passport may be required in the future for international travelers entering the U.S., but it will not impose a federal requirement for domestic purposes. However, it is working with the private sector to develop standards around such certifications. A COVID-19 vaccine certification for international travel could be used by governments in several ways, such as allowing an individual to move across borders more freely by potentially bypassing travel restrictions like testing or quarantine requirements upon arrival. The challenge is to standardize how data in vaccination records are tracked. Creating an environment where vulnerable populations can move around safely and know that people are safe and vaccinated would be an excellent scenario.

One thing is sure: it is necessary to homogenize the data included in the various vaccine passports in view of their international use in several languages. It is still an ongoing question as to how populations that are either ineligible or unable to receive the COVID-19 vaccine will be included in a COVID-19 vaccine passport system. A set of standards needs to be defined on which the whole world can rely. One of the most significant hurdles is the sheer number of passport initiatives underway. The Biden administration identified at least 17 of them Last March. Japan Airlines and Quantas are currently testing the CommonPass application. This technology should enable individuals to prove their COVID-19 status and present vital information concerning vaccination, regardless of the language and standards adopted from one region to another. For international travel, vaccine passports may be useful for several years and could be required in one form or another. This is no worse than the requirement to be tested within the past three days.

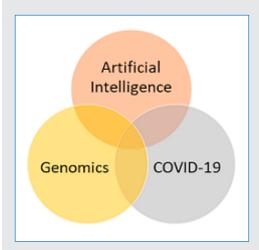
Nationally, since it is hoped that most of the population will be vaccinated in the next few months, setting up a general passport forces us to think about the constraints that this would entail. If it is well designed, it should not pose a risk regarding personal data nor become a means for the administration to have intrusive access to the health status of fellow citizens. But it could become oppressive if one is required to show it on a bus, or to go into a store to buy a magazine, etc. The free choice to be vaccinated is lost and some people might be offended by the discrimination this could create between supposedly free and equal citizens. Admittedly this could offer a breath of fresh air to occupations that have suffered (culture, tourism, hospitality), but if vaccine doses are hard to come by and as long as all those who wish to be vaccinated have not been able to do so, it becomes difficult to practice at the national level. This could be seen as a surreptitious way of making the vaccine more or less compulsory. It is better to encourage people to be vaccinated, especially people exposed to patients in the workplace.

Should we go further and move from injunction to obligation? There is no doubt that the effects could be counterproductive. If it is required, this means that we cannot reassure people of its safety. Proper education is better than authoritarianism. Many countries have sought magical solutions to stop the pandemic. The

urgency of the moment is not so much the passport but the vaccination.

The most obvious issue is that it is still unclear whether vaccination prevents transmission, and what are the strength and duration of the immunity provided. Vaccinated people may still be able to unknowingly spread the virus. That is why, on February 7, the WHO released a statement dissuading nations from using vaccine passports as a requirement for entry or exit, stating that there are still critical unknowns and there is a need for further scientific investigation into COV-ID-19 vaccine products and recently reiterated its opposition. It should be ensured that vaccine passports are standardized internationally in design and use, also that they do not violate ethical standards or antidiscrimination laws. We must not forget that most people in low and middle-income countries do not have access to COVID 19 vaccines and may not until 2023 or later... Reliable and accessible proof of the protection conferred by COVID-19 vaccination could accelerate travel and reopening of the economy, but the obstacles to large-scale adoption of a vaccine passport system, as well as problems of data privacy or interoperability and equity, are so substantial that such a system seems premature today.

News from the IFCC Website



A new survey by the IFCC WG on Artificial Intelligence and Genomic Diagnostics (WG-AIGD)

The IFCC WG on Artificial Intelligence and Genomic Diagnostics is happy to present its most recent survey assessing the role of AI in genomic tests for detecting COVID-19.

In light of the continuing importance of the COVID-19 pandemic, the WG has examined the role of AI in genomic tests for the diagnosis of COVID-19 (literature surveyed 2019 – March 2021) to provide a readily accessible summary of the status and progress in this area.

Read more

NEWS FROM REGIONAL FEDERATIONS AND MEMBER SOCIETIES



News from the Japan Society of Clinical Chemistry (JSCC)

2020 JSCC Technology Award

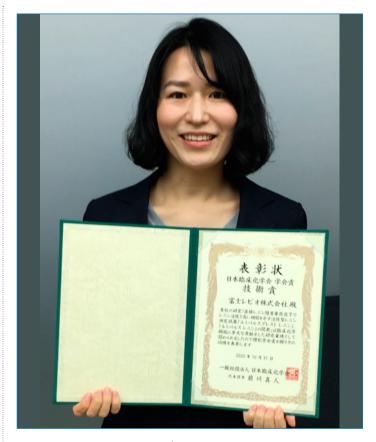
by Dr. Hideo Sakamoto International Exchange Committee of JSCC

The Japan Society of Clinical Chemistry (JSCC) Technology Award is given to a person who has made outstanding academic research in clinical chemistry. In 2020, Kumiko Hamano, M.S. and Daisuke Kawakami, M.S. are winners of the Technology Award. The award presentation was held at the 60th Annual Meeting of JSCC in Tokyo, Japan from October 30th-November 1st, 2020. At the award presentation, award winners Ms. Hamano and Mr. Kawakami were congratulated by Dr. Masato Maekawa, president of JSCC for their outstanding work in clinical chemistry.

In this issue, we would like to introduce the winners of the Technology Award to promote their outstanding work.

Kumiko Hamano MS, (Research and Development Division, Fundamental Research Department, Fujirebio inc.) is the winner of the 2020 JSCC Technology Award, entitled "Development of Active Renin Concentration assay, "Lumipulse Renin", which shows a high correlation with Plasma Renin Activity assay even under the condition with direct renin inhibitor."

Renin is a member of aspartic protease and controls blood pressure via the "renin-angiotensin-aldosterone" system. Measurement of the renin concentration is useful to screen primary aldosteronism (PA) in a large number of hypertensive patients. Plasma Renin Activity (PRA) and Active Renin Concentration (ARC) are popular assays for the diagnosis of PA. However,



Kumiko Hamano

PRA requires a long assay time and strictly careful sample management for an accurate assay. On the other hand, ARC directly detects the renin molecule and thus provides results in a short time. But conventional ARC assays may have a poor correlation with PRA under treatment with direct renin inhibitors such as aliskiren. To solve this problem, she established a unique anti-renin antibody which does not react with

inactivated renin under the existence of aliskiren. Based on the unique characteristics of this antibody, she developed the highly sensitive chemiluminescence immunoassay for detecting direct renin using fully-automated LUMIPULSE systems. The ARC, named "Lumipulse Renin" and "Lumipulse PRESTO Renin" are observed well correlation with PRA even in the treatment of aliskiren. In addition, this assay can reduce dramatically turnaround time compared to the PRA assay. It is considered useful for the routine analysis of ARC and the diagnosis for primary aldosteronism from the large number of hypertensive patients.

Daisuke Kawakami, MS, (Clinical & Biotechnology Business Unit, Shimadzu Corporation) is the winner of the 2020 JSCC Technology Award, entitled with "Development of an Analytical Method for four Immunosuppressants on the same Platform using a Fully Automated LC-MS/MS System and an Immunosuppressant Analysis Kit."

The gold standard method of blood concentration analysis is considered the LC-MS/MS. This is because it does not have the issue of cross detecting metabolites. However, depending on the drug being analyzed the mobile phases, columns and pretreatments change, making switching between analyses complicated. In this study, an easy and reliable blood concentration measurement method for immunosuppressants (Tacrolimus, Cyclosporine A, Everolimus and Mycophenolic acid) on the same platform (common mobile phase and column) using a fully automated LC-MS/MS system and an immunosuppressant analysis kit was developed. His group believes this simple and reliable method will also allow for the determination of blood concentrations of

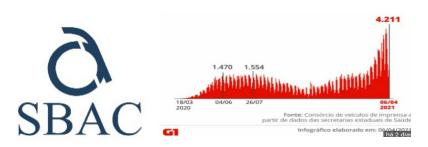


Daisuke Kawakami

antiepileptics, antifungals, anticancer drugs and antiviral agents. Using this system, it is also possible to measure the blood concentration of COVID-19 drugs and their candidates to evaluate their efficacy. His group already completed the development of methods for Remdesivir, Favipiravir, Dexamethasone and their metabolites. Thus, fully automated LC-MS/MS System contributes to the further development of clinical chemistry.



The leading role of the clinical analysis laboratory in fighting the COVID-19 pandemic in Brazil



by Flavia Marinelli, PhD
Universidade Federal de Santa Catarina
Jorge Luiz Terrão, Clinical Chemistry Expert
Tomazzi Laboratory, Espírito Santo
Lenilza Mattos LIMA, PhD
Universidade Federal de Santa Catarina
Maria Elizabeth Menezes, PhD
Vice president SBAC/Rio de Janeiro
Paulo Murilo Neufeld, PhD
Universidade Federal de Rio de Janeiro

In Brazil, the regulation of laboratory activities is carried out by the National Health Surveillance Agency (ANVISA). Simultaneously with the beginning of the SARS-CoV-2 pandemic, to increase access to the Unified Health System (SUS) in a country with a continental dimension, ANVISA proposed a profound change in the regulation of services provided by Clinical Analysis Laboratories, making it easier to perform point of care testing - POCT (immunochromatographic exams) to detect SARS-CoV-2 outside the laboratory environment. Thus, trying to remove from the laboratories the role and legal prerogative of carrying out these exams, which compromises the quality of its results, as well as the safety of patients, in view of the inadequacy of the environments and the lack of quality control protocols .

As in many countries, COVID-19, a severe acute respiratory disease, has shown a high number of cases and deaths in Brazil. Complex serological and molecular tests, initially carried out in research institutes and public reference laboratories, quickly reached private clinical analysis laboratories in Brazil. The laboratory is, in effect, the place of excellence for the performance of exams by POCT and molecular biology, as it has a physical and operational structure, legally qualified professionals and quality management of the pre-analytical, analytical and post-analytical phases. It is important to mention that it is in the clinical laboratory that the process of validation of analytical tests is carried out, as well as it is the environment where the new diagnostic methods arrive more quickly, which often have greater sensitivity and specificity. Currently, this is particularly true for COVID-19. In addition to the validation of tests, internal and external quality control is essential for the issuance of reliable results and the reliable interpretation of test results. Again, this same reality applies to the diagnosis of COVID-19.

In this scenario of coping with the pandemic, the clinical analysis laboratory plays a role of exceptional magnitude, acting both in the collection and processing of biological material for the rapid and accurate diagnosis of COVID-19, as well as in the prognosis and assistance to patients. It should also be considered that the perception of the high risk of contamination for professionals working in the care of patients and in carrying out the exams has turned the laboratories to improve their biosafety protocols, making them even more adequate and safe to perform the tests for COVID-19. Undoubtedly, the safety protocols for obtaining, transporting and handling clinical specimens contribute to the provision of accurate results, as well as to the containment of the pandemic.

There is no way to remove from the clinical analysis laboratory its role in carrying out the exams for COVID-19. Complementary tests essential for monitoring and disease prevention, which include, but are not limited to, monitoring of blood cells, coagulation, blood glucose, blood gas, cardiac and renal markers, inflammatory response and plasma cytokine levels, can only be performed within clinical laboratories.

Due to the belief that there is no other space for the exams for COVID-19, entities such as the Brazilian Society of Clinical Analyses, the Brazilian Society of Clinical Pathology/Laboratory Medicine and the Federal Council of Pharmacy have vigorously defended together with the Brazilian regulatory agency (ANVISA) the natural role and intellectual reserve of clinical laboratories and clinical analysis professionals in the execution of tests for this coronavirus.

The struggle for the clinical laboratory to be valued and recognized as an essential element in the fight against COVID-19, as historically has been fought in other contexts in Brazil, shows, once again, that the clinical laboratory wishes to be a research and active intervention to solve health problems caused by a pandemic that has been extremely harmful to the Brazilian population. In this sense, the clinical laboratory has no way of giving in or giving up its greater conviction than that of restoring the patient's health, through its [inalienable] analytical practices.

The information is from the authors, and not necessarily from the IFCC.

News from the IFCC Website

IFCC Webinars

Live Series 2021





"Application of laboratory techniques in the diagnosis of Infectious Diseases" 6th April, 2021

实验室技术在感染性疾病诊断中的应用

IFCC webinar content is available on demand at:

https://www.workcast.com/?cpak=8172916142437123&pak=9776851145646643

The webinar focused on recent laboratory techniques including metagenomic Next-Generation Sequencing (mNGS) and digital PCR in the diagnosis of infectious diseases.



1st Latin American Week of Quality in Health

April 5 - 8, 2021



by Alvaro Justiniano-Grosz COLABIOCLI President Rosa Sierra-Amor, PhD Miembro eNews WG CPD

Under the initiative of the LATIN AMERICAN CONFED-ERATION OF CLINICAL BIOCHEMISTRY (COLABIOCLI), the need was raised to develop a motivating activity that in the future becomes a reference in Latin America in the theme of "Quality in Health".

The objective was to promote quality management as an interdisciplinary work by health teams, and to carry out coordinated commemorative activities between professional entities affiliated to COLABIOCLI and the universities.

In this context, the commemoration of Quality in Health Week with the collaboration between CO-LABIOCLI and the Pan American Health Organization (PAHO), and the active participation of young scientists, the first Latin American Week of Quality in Health was officially launched in the region simultaneously and virtually, and several countries organized activities. On April 5th, COLABIOCLI President Dr. Alvaro Justiniano-Grosz welcomed participants. Juana Ortellado de Canese, PhD described how national societies and institutions were going to be incorporated into this event; Dr. Santiago Fares-Taie, Chair, IF-CC-TF YS welcomed young scientists from Latin America focusing on the importance of their participation, and Jorge Hernández-Bello, PhD Chair of the Quality Health Week in Mexico, presented information about the regional program and the participants. To conclude, Dr. Jean-Marc Gabastou from PAHO gave a conference on COVID-19, a global and regional approach, with Q&A about the future after the pandemic.

This report summarized the success of the 1st Latin American Week of Quality in Health along the region.

In **Bolivia**, the Bolivian Society of Clinical Biochemistry (SOBOBIOCLI) developed a webinar entitled "Quality from the experiences of the Clinical Laboratory". The topics were "Value of the Pre-Analytical phase in Laboratory Examinations", "Implementation of Internal Quality Control in Laboratories, and a video with the participation of the Universidad Mayor de San Andrés in coordination with SOBOBIOCLI-La Paz.

The National College of Bacteriology of **Colombia** carried out an activity aimed at the first level of primary care through systematic reviews of scientific literature nationally and internationally searching for Guides with the objective to standardizing the report of results in routine microscopic analyses at the primary health care and its harmonization in the clinical laboratories.

On April 7th, the **Chile**an Society of Clinical Chemistry developed a binary website entitled "Pre Analytical from Hearing Disability" to commemorate the First Week of Quality in Health.

In **Guatemala**, with the Association of Biologists Chemists of Guatemala (AQBG) and the University of San Carlos of Guatemala, they developed four days of activities on the following topics: "The role of the Biologist Chemist in the quality of health and in the multidisciplinary health team", activity organized by Young Professionals of Guatemala, and "Experiences in the Supervised Professional Exercise before the Covid-19 pandemic finalizing with "Challenges and Opportunities before the Covid-19 Pandemic".





FECHA: 5 de Abril de 2021



HORARIOS

19:30 hrs BOLIVIA

20:30 hrs URUGUAY

18:30 hrs MEXICO

LANZAMIENTO DE LA LA SEMANA DE LA CALIDAD EN SALUD COLABIOCLI +

PROGRAMA



PRESENTACION DE LA SEMANA DE LA CALIDAD DR. ALVARO JUSTINIANO GROSZ PRESIDENTE COLABIOCLI



COMO SE INCORPORAN LAS ENTIDADES NACIONALES, INSTITUCIONES Y UNIVERSIDADES EN LA SEMANA DE LA CALIDAD DRA. JUANA ORTELLADO



LOS JOVENES PROFESIONALES Y SU PARTICIPACION EN LA SEMANA DE LA CALIDAD: Dr. SANTIAGO FARES TAIE DR. SANTIAGO FARES TAIE



QUE HAREMOS EN LA SEMANA DE LA CALIDAD, "SOLO UN EJEMPLO". DR. JORGE HERNÁNDEZ



"COVID-19, SITUACION MUNDIAL Y REGIONAL Y PREGUNTAS MAS FRECUENTES HACIA EL RETORNO A LA NUEVA NORMALIDAD" DR. JEAN-MARC GABASTOU

Transmisión vía:







Visita www.colabiocli.com

Dominican Republic through the Dominican College of Bioanalysts (CODOBIO), and the University of Santo Domingo inaugurated a course entitled "Quality Management for Health Services" with the participation of more than 80 health professionals

In Mexico, the event was a multidisciplinary work that started from April 6th to 8th, 2021. In the three days of virtual broadcast, eight presentations and one panel of experts were presented. Three institutions collaborated in the organization: the University of Guadalajara (UdG), the Mexican Association of Clinical Laboratory Sciences (CMCLabC), and the Mexican Association of Quality in Patient Health and Safety (AMEXCASEP). There were nine presentations about the role of Quality in Health addressing: "the Clinical Laboratory", "Molecular biology", "Pharmaceutical industry", "Hospital services", "WHO Quality in Health guidelines" and "How to approach health services during the COVID-19 pandemic". In this first edition, Mexico had 2,295 registered participants from different countries, including Mexico, Argentine, Bolivia, Brazil, Chile, Costa Rica, Colombia, Dominican Republic, Cuba, Ecuador, United States, El Salvador,

Honduras, Guatemala, Paraguay, Peru, Nicaragua, Panama and Venezuela, with more than 3,000 video views. The presentations were recorded and are on-demand at CMCLabC Facebook.com

The Association of Biochemists of **Paraguay** (ABP) together with the faculty of Chemical Sciences of the National University of Asuncion, held a cycle of virtual conferences also from April 6th to 8th, 2021, under the slogan "Biochemistry as a promoter of quality" addressing topics such as: "Six Sigma in the Clinical Laboratory", "Biosafety", "Quality Assurance" "Analysis of Mode Effect Fails" "Quality in the Clinical Laboratory, reliable results", "Patient-centered on risk assessment" with extensive participation of colleagues from the country and others from Latin America.

This important activities organized by COLABIOCLI must become institutionalized in Latin America, to have greater regional relevance. We look forward to next year's Week on Quality in Health, with the continuous participation of professionals from different scientific and medical fields from Latin America. https://colabiocli.com/webinars/.



Three new vaccinology programs at the University of Zimbabwe

by Prof. Tomris Ozben
Prof. Hilda Tendisa Marima-Matarira
Prof. Nyasha Chinombe
University of Zimbabwe

The COVID-19 pandemic has reminded all of us once more the importance of preventive medicine and the role of vaccines in achieving this aim. Vaccination is the only way to cope with pandemics and other infectious diseases as well. The COVID-19 vaccines have been produced in a very short time, and several vaccines are now available for public use, but unfortunately in limited quantities. The amounts of vaccines produced up to now are far from fulfilling the required vaccine needs of the populations all around the world. It is necessary to vaccinate more than two thirds of world populations to achieve adequate immunity, but it seems difficult to reach this outcome in

a short term. Delivering the vaccines to the different parts of the world is also a big challenge. Another big challenge is the increasing contagious risk of the virus mutations. The development of vaccines effective on virus variants/mutations is also an important aspect to be achieved.

We are proud to inform you that University of Zimbabwe (UZ), College of Health Sciences has started three post-Graduate programs in Vaccinology to educate students in this emerging field to be ready for such pandemics and to improve the healthcare given in Zimbabwe and all around the world in the fight against infectious diseases.

Three new Post graduate programs in vaccinology recently opened are indicated below.

- 1. Master of Science (MSc) in Vaccinology
- 2. Master of Philosophy (MPhil) in Vaccinology
- 3. Doctor of Philosophy (DPhil) in Vaccinology

The Vaccinology programs at the University of Zimbabwe (UZ) College of Health Sciences, have been prepared according to the response to Education 5.0 Curriculum Call and five Missions of the UZ which are Teaching; Research; Community Service (Education 3), Innovation and Industrialization (Education 5). The training programs in vaccinology have been designed to provide students "Hands-on skills", "Problem-solving skills" and "Critical thinking skills". The aim of the programs is to educate high level scientists in vaccinology who will develop vaccines. The final learning target is to bring the students to a level having intellectual capacity, ideas, and knowledge to apply methods to create drugs, vaccines, efficient treatment strategies for the patients and health sector.

The eight modules of the programs have been completed and the post-graduate programs are ready to accept the students. The programs are open to the students all around the world. The education is in English.

Students from all over the world are welcome to the high-quality postgraduate education programs in vaccinology in University of Zimbabwe, College of Health Sciences.

Professor Tomris Ozben

External Examiner

Chemical Pathology Unit

Department of Diagnostics and Investigative Sciences

Faculty of Medicine and Health Sciences

University of Zimbabwe

Harare Zimbabwe

Professor Hilda Tendisa Marima-Matarira

Chemical Pathology Unit

Department of Diagnostics and Investigative Sciences

Faculty of Medicine and Health Sciences

University of Zimbabwe

Box A 178 Avondale Harare Zimbabwe

Professor Nyasha Chinombe

Chemical Pathology Unit

Department of Diagnostics and Investigative Sciences

Faculty of Medicine and Health Sciences

University of Zimbabwe

Box A 178 Avondale Harare Zimbabwe

Click here to see the presentation of the post-Graduate programs in Vaccinology.



News from the Saudi Society Clinical Chemistry (SSCC)

The International Laboratory Week / Quality Seminar



by Dr. Anwar Borai SSCC representative to the IFCC https://sscc.med.sa/ boraiaa@ngha.med.sa

Saudi Society for Clinical Chemistry held the INTERNATIONAL LABORATORY

The keynote speaker for the seminar was Dr. Graham Beastall from the United Kingdom, Past President IFCC. The seminar was accredited by the Saudi Commission for Health Specialties (SCHS) for a total of seven CME hours,

WEEK / QUALITY SEMINAR on 7th April 2021 virtually.

with more than 2000 delegates attending the meeting.

The Scientific Program included 3 sessions with 11 speakers mainly 9 KSA speakers and 2 international speakers (UK & Belgium).

This scientific program sessions' titles were about Standardization, Accreditation, and Quality Management.

Clinical laboratory Dianostic Companies including international and local representatives participated actively in the symposium. Two speakers were from BD and Biorad.

By the end of the seminar there was General SSCC Meeting announcment. In this announcement, Dr. Samia Sobki (the president of the SSCC) demonstrated the achievements of the society within the 1st quarter of 2021. These achievements are summarized in the table below:.

SSCC Scientific & Social Activities (January-April 2021)

	Activity	Place	Туре	Date	CME
1	Laboratory Biomarkers of Diseases-Liver Diseases	Online	Workshop	Jan 25, 2021	2 Hrs
2	1st Journal Club Meeting	Online	Journal Club	Feb 07, 2021	2 Hrs
3	Laboratory & Clinical Application of High Sensitivity Cardiac Troponin Tests	Online	Webinar	Feb 24, 2021	2 Hrs
4	يملاعلا مويلا عم إنمازت روهمجلل ةهجوم ةيوعوت ةودن ةردانلا ضارمألل Awareness: Rare Diseases Day	Online	Awareness	Feb 28, 2021	-
5	ةردانلا ضارمألل يملااعلا مويلا عمانمازت يوعوت ويدف (Rare Disease Day)	Website	Awareness	Feb 28, 2021	-
6	SPOCT Saudi Point of Care Testing Association POCT Series 1: Diabetes Mellitus	Online	Workshop	Mar 09, 2021	3 Hrs
7	Series Laboratory Biochemistry of Diseases: Heart Disease	Online	Webinar	Mar 22, 2021	2 Hrs
8	SPOCTA Club Meeting Saudi Council for Health Specialties	Online	Webinar	Mar 24, 2021	2 Hrs
9	يحصلا لاجملا يف لام عاله قداير Pioneers in Health Work	Online	Awareness	Mar 30, 2021	-
10	Patient-Centered Blood Gas Testing at the Point-of-Care with an Intelligent Approach to Quality Management	Online	Workshop	Mar 31, 2021	3 Hrs
11	International Lab Week and Quality Seminar Program	Online	Seminar	April 07, 2021	7 Hrs
12	2nd Journal Club 2021 King Abdulaziz Medical City - Jeddah	Online	Journal Club	April 11, 2021	2 Hrs
	TOTAL				25 Hrs



EFLM News

EFLM Awards 2021

EFLM is pleased to announce the EFLM Awards 2021 to be presented at the 24th IFCC-EFLM EuroMedLab Congress in Munich (28 November - 2 December 2021):

- EFLM Award for Scientific Achievements in Laboratory Medicine sponsored by Roche Info
- EFLM Award for Achievements in Advancing Laboratory Medicine in Europe sponsored by Roche Info
- EFLM Award for Excellence in Outcomes Research in Laboratory Medicine sponsored by Abbott Diagnostics - Info
- EFLM Award for Excellence in Performance Specifications Research sponsored by Abbott Diagnostics Info
- EFLM Cardiac Marker Award sponsored by HyTest Info

The deadline to submit application is: 31 May 2021.

EFLM awards are made possible thanks to kind and unconditional support of:







Updates on EFLM publications

How to meet ISO15189:2012 pre-analytical requirements in clinical laboratories? A consensus document by the EFLM WG-PRE

Vermeersch P, Frans G, von Meyer A, Costelloe S, Lippi G and Simundic A-M

Clin Chem Lab Med 2020, Available from: https://doi.org/10.1515/cclm-2020-1859

Reported by Serkan Bolat, corresponding member of the EFLM WG-Promotion & Publications

Although the key standards for the preanalytical phase are determined by The International Organization for Standardization (ISO) 15189:2012, there are significant differences in the interpretation of these requirements. To overcome these challenges, the European Federation of Clinical Chemistry and Laboratory Medicine (EFLM)



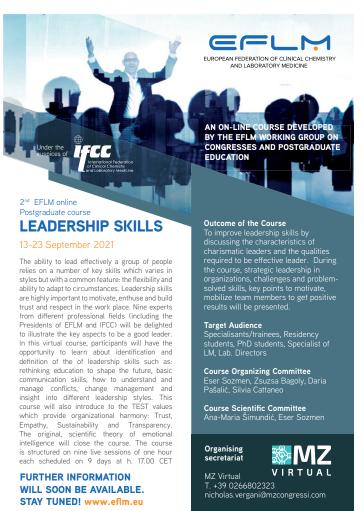
Working Group for Pre-analytical Phase (WG-PRE) have published consensus to review ISO requirements and to guide laboratories on how to meet these requirements. Authors hope that laboratory professionals will improve the preanalytical phase quality in their laboratory by applying the minimal recommendations or best-in-class solutions based on ISO15192:2012 requirements described in this consensus. Each ISO requirement described in ISO15189:2012 including pre-analytical quality indicators and sample collection, transport, reception, and acceptance have been reviewed and agreed on the recommendations.

The authors are aware that the laboratories will have difficulties with the implementation of the best-in-class solutions based on the state-of-the-art, but they believe that professionals will improve their procedures with this extended guide and approach the best-in-class solutions by putting them above the minimal requirements.

Upcoming EFLM events

The EFLM Postgraduate Courses, organized by EFLM Working Group on Congresses and Postgraduate Education (WG-CPE), aim to focus on attractive topics for young trainees, and specialists. These educational courses are generally organized on 1 or 2 days and the theme, programme and speakers are proposed by the WG-CPE. Due to current pandemic, EFLM is offering these courses on-line on these following two topics: Leadership Skills and Biostatistics.





IFCC'S CALENDAR OF CONGRESSES, CONFERENCES & EVENTS

We advise readers to keep up-to-date about the evolving situation and possible rescheduled dates.

Contact organizing secretariats for updates on upcoming events.

Calendar of IFCC Congresses/Conferences and Regional Federations' Congresses

May 10, 2021	International Federation of Clinical Chemistry and Laboratory Medicine	IFCC Live webinar on: Risk Management in Clinical Laboratories	Webinar
May 27 - 29, 2021	ARAB FEDERATION OF CLINICAL BIOLOGY AFCB	AFCB Congress 2021	Beirut, LB
Sep 23 - 25, 2021	severation of Clinical Clinica	AFCC Congress 2021	Lusaka, ZM
Nov 26 - 29, 2021	XV ICPLM Emerging Technologies in Pediatric Laboratory Medicine	International Congress of Pediatric Laboratory Medicine	Munich, DE
Nov 28 - Dec 2, 2021	EUROMEDLAB 2021 MUNICH	XXIV IFCC - EFLM EuroMedLab Munich 2021	Munich, DE

Dec 6 - 7, 2021	International Federation of Clinical Chemistry and Laboratory Medicine	IFCC-ICHCLR Workshop on overcoming challenges to global standardization of clinical laboratory testing: reference materials and regulations	Paris, FR
Mar 30 - Apr 2, 2022	COLABIOCLI	XXV COLABIOCLI Congress	Leon, MX
June 26 - 30, 2022	SEOUL 2020	XXIV IFCC WorldLab Seoul 2022	Seoul, KR
Oct 15 - 18, 2022	AP CER	XVI APFCB Congress 2022	Sydney, AU
May 21 - 25, 2023	EUROMEDLAB ROMA 2023	XXV IFCC - EFLM WorldLab EuroMedLab - Rome 2023	Rome, IT
New date TBA	International Federation of Clinical Chemistry and Laboratory Medicine	IFCC Forum for Young Scientists	ТВА

Corporate Member Events with IFCC auspices

We advise readers to keep up-to-date about the evolving situation and possible rescheduled dates.

Contact organizing secretariats for updates on upcoming events.

Jun 3, 2021 Embracing Sustainable Laboratory Medicine Ortho Clinical Diagnostics, webinar

Other events with IFCC auspices

We advise readers to keep up-to-date about the evolving situation and possible rescheduled dates. Contact organizing secretariats for updates on upcoming events.

Mar 3 - Dec 3, 2021	Virtual Diploma in Clinical Biochemistry program	Mexico Online event
Apr 26 - Jul 12, 2021	Course on Neonatal Screening	Uruguay Online event
Apr 29 - Jun 10, 2021	Academia SEQC-ML (Clinical research methodology and specific statistical analysis in laboratory medicine)	Spain Series of webinars
May 5 - 8, 2021	Conmemoracion 52 aniversario, CODOBIO y celebracion el dia Nacional del Bioanalistas en República Dominicana	Dominican Republic Online event
May 25 - 27, 2021	Flip Style 3rd Fundamentals of Quality Control in Clinical Laboratory to Improve Patient Safety	Pakistan Online event
May 29, 2021	XIII Jornada Ibérica Virtual AEFA-OF	Spain Online event
Jun 10 - 11, 2021	8th International Symposium on Critical Care Testing and Blood Gases	Biarritz, FR
Jun 14 - 18, 2021	UKMEDLAB21 – Annual Meeting of the ACB organized by Association for Clinical Biochemistry and Laboratory Medicine	UK Online event
Jul 12, 2021	MASTERCLASS (POCT) Quality in the Spotlight	Online event

Aug 18 - 21, 2021	XXVII International Congress of the Latin American Cooperative Group of Haemostasis and Thrombosis	Colombia Online event
Sep 1 - Nov 3, 2021	1st EFLM online Postgraduate course: Biostatistics in Laboratory Medicine	Online course
Sep 6 - 7, 2021	POCT: Making the point	Rome, IT
Sep 7 - 9, 2021	International Congress of Metrology 2021	Lyon, FR Hybrid even
Sep 8 - 11, 2021	XXVIII Balkan Clinical Laboratory Federation Meeting and XIII National Conference of Clinical Laboratory	Sofia, BG
Sep 13 - 23, 2021	2nd EFLM online Postgraduate course on Leadership Skills	Online course
Sep 23, 2021	International Conference on Laboratory Medicine: "The Ethics of Quality and Artificial Intelligence in Laboratory Medicine"	Padova, IT
Sep 28, 2021	The Global Creation and Monitoring of the Traceability of Test Results in the Medical Laboratory	The Netherlands, Online and on site event
Oct 5 - 10, 2021	FEBS Advanced Course: 360-degree Lysosome; from structure to genomics, from function to disease-update	Izmir, TR
Oct 6 - 8, 2021	4èmes Journées Francophone de Biologie Médicale	Rennes, FR
Oct 7 - 10, 2021	46th ISOBM Congress	Bled, SI
Oct 28 - 30, 2021	II National Meeting Conquilab and Technological	Mazatlan, MX
Dec 6 - 7, 2021	Molecular Cytopathology	Naples, IT Hybrid event
Feb 10 - 11, 2022	International Congress on Quality in Laboratory Medicine	Helsinki, Fl
May 23 - 26, 2022	10th Santorini Conference "Systems medicine and personalized health and therapy" — "The odyssey from hope to practice: Patient first — Keeps Ithaca always in your mind"	Santorini, GR

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Jordan (JO) Uruguay (UY) Kazakhstan (KZ) Vietnam (VN) Kenya (KE) Zambia (ZM) Korea (KR) Zimbabwe (ZW)

Regional Federations

Arab Federation of Clinical Biology (AFCB) African Federation of Clinical Chemistry (AFCC) Asia-Pacific Federation for Clinical Biochemistry and Laboratory Medicine (APFCB) **European Federation of Clinical Chemistry** and Laboratory Medicine (EFLM) Latin America Confederation of Clinical Biochemistry (COLABIOCLI) North American Federation of Clinical Chemistry and Laboratory Medicine (NAFCC)



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Brazil: Sociedade Brasileira de Patologia Clínica / Medicina Laboratorial (SBPC/ML) China: Lab Medicine Committee, China Association of Medical Equipment (LMC)

Egypt: Egyptian Association of Healthcare Quality and Patient Safety

France: French National Network of Accredited Laboratories of Medical Biology (LABAC)

India: Association of Medical Biochemists of India (AMBI)

Iran: Iranian Association of Clinical Laboratory Doctors (IACLD)

Jordan: Society for Medical Technology & Laboratories (SMTL) Kazakhstan: Public Association - Federation of Laboratory Medicine (FLM)

Mexico: Federación Nacional de Químicos Clínicos (CONAQUIC A.C.)

Nepal: Nepalese Association for Clinical Chemistry (NACC)

Philippines: Philippine Council for Quality Assurance in Clinical Laboratories (PCQACL)

Romania: Order of the Biochemists, Biologists, Chemists in Romanian Health System (OBBCSSR)

Serbia: Serbian Society for Clinical Laboratory Medicine and Science (SCLM)

Spain: Andalusian Society for Clinical Analysis and Laboratory Medicine (SANAC)

Asociación Española de Farmacéuticos Analistas (AEFA)

Sri Lanka: College of Chemical Pathologists of Sri Lanka (CCPSL)

Turkey: Society of Clinical Biochemistry Specialists (KBUD)

Ukraine: Association for Quality Assurance of Laboratory Medicine (AQALM)





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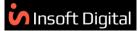
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